BEST AVAILABLE COTY

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000													
CLAIMS AS FILED - PART (Column 1)					(Column 2)		SMAL TYPE	SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			20	20				E	FEE	1 1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			20 minus 20=		. 0		X\$:	9=		OR	X\$18=		
INDEPENDENT CLAIMS			/ minus 3 =		. 0		X40)=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT							+13	5=		OR	+270=		
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	TOT			OR	TOTAL	710	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column								SMALL ENTITY OF			OTHER THAN		
AMENDMENT A	,	CLAIMS REMAINING AFTER AMENDMENT		PREVI	IBER	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	*	Minus	**		=	X\$:	9= □		OR	X\$18=		
AME	Independent		Minus	***		=	X40)=		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT				I CLAIM		+13	5=		OR	+270=		
								OTAL	_	ا م	TOTAL ADDIT. FEE		
		(Column 1)			ımn 2)	(Column 3)	-	. EE		-			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=	<u> </u>	OR	X\$18=	<u></u>	
	Independent	*	Minus	***	TOLAN]=	X40)=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								5=		OR	+270=		
								OTAL FEE		 	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)								,		- -			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER IOUSLY D FOR	PRESENT EXTRA	RA ⁻	ſΕ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	X\$	Э=		OR	X\$18=		
ME	Independent	*	Minus	***		=	X40)=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDEN			PENDEN	IT CLAIM		l		_	1		1	
	If the entry in colu	ımn 1 is less than t	the entry in col	umn 2, wri	te "0" in co	olumn 3.	+13			OR	+270=		
••	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												